Co-Occurring Disorders Service Delivery Quality Initiative Workgroup Meeting Minutes

Meeting Chair: Blaine Shaffer, M.D. Attendees: Paula Eurek, Renee Faber, Tamara Gavin, Julie Hippen, JoAnn O'Connell, Mary O'Hare,

Meeting Date: December 6, 2010 Blaine Shaffer, Ann Tvrdik, Cameron White, Linda Wittmuss

Meeting Location Region 5 Systems

Meeting Co-Occurring Disorders

Service Delivery Workgroup By Phone: Judie Moorehouse

| Topic/Issue | Discussion | Recommenda- tions/ Action | Resp Party | Due Date |
|---|---|---|----------------|----------------|
| Minutes | The minutes were approved as written. | | | |
| Revised Work Plan | The revised workplan was approved by the committee. (Handout) | | | |
| Roadmap and Comprehen- sive Action Plan | Mary presented a template for the roadmap and comprehensive action plan. (2 Handouts) The roadmap will consist of priority areas such as awareness, infrastructure development, COD workforce education training, recruitment retention, prevention screening assessment, treatment planning, evidence-based practices, financial/data, and partnerships, as well as a synopsis of the outcomes expected. The entire COD workgroup will decide upon the priority areas after all of the subcommittees have presented their action plans. The priority areas will guide the development of a comprehensive action plan which will be inclusive of all strategies/activities/outcomes developed by the subcommittees. The strategies/activities/outcomes in the subcommittee action plans (prevention, principles, workforce, etc.) will be assigned a priority area by the subcommittees. The outcomes in the comprehensive action plan should be measurable. | Prepare activities for developing the Roadmap and Comprehensive Action Plan | Mary O'Hare | March, 2011 |
| SAMHSA Strategic Initiatives | The eight SAMSHA Strategic Initiatives are relative to the work the COD workgroup is completing as is the Nebraska Behavioral Health Strategic Plan. 85% of all non-sex offender and non-forensic admissions to LRC in Fiscal Year 2010 had a COD. | | | |

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| Prevention | The Prevention Subcommittee presented a powerpoint and their action plan. (2 Handouts Some discussion points included: Prenatal drug exposure: A noncriminal way for getting services to those who are pregnant and using drugs needs to be explored. All state received block grant funding need to be explored for potential prevention activity support. Going 'upstream' to find precursors to mental health and substance use disorders and addressing risk and promoting protective factors is one way to conceptualize combining mental health and substance use disorder prevention strategies. Current prevention strategies need to expand the focus beyond the younger age groups, addressing other age groups such as elderly and the military. Prevention coalitions for different populations may be helpful. Mental health prevention activities have not typically been initiated except in early childhood prevention. Wellness promotion rather than disorder prevention may be common ground to work toward. The Prevention Action Plan will be reviewed again at the next meeting. | Revise Action Plan | Mary O'Hare | Jan. 3, 2011 |
| Partner Settings Action Plan | The Partner Settings Action Plan was reviewed and upgrades completed. | Revise Action Plan | Mary O'Hare | Jan. 3, 2011 |
| COD Workforce Action Plan | The COD Workforce Action Plan is reviewed and upgrades completed. | Revise Action Plan | Mary O'Hare | Jan. 3, 2011 |
| Homework Assignments | All workgroup members are asked to read the following Overview Papers: Overview Paper No. 7: Systems Integration Overview Paper No. 6: Services Integration | | | |
| Adjournment & Next Meeting | Meeting adjourned at 4:30. Next Meeting: January 3, 2011 at Region V Systems | | | |
| | Call In Number: 888-820-1398, Attendee Code: 8928797# | | | |